Evaluation of Dominant Breast Masses

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- A 12 yo female presents complaining of a small mass directly under her right nipple. You should:
- a. Reassure her that it is benign
- b. Order an US
- c. Order a mammogram
- d. Perform an FNA
- e. Refer to surgery for excisional biopsy

- A 25 yo female presents complaining of a mass present in her left upper outer breast for the past 6 months. The best initial step is to:
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The most likely diagnosis is:

- a. Breast cancer
- b. Cyst
- c. Fibroadenoma
- d. Normal breast tissue

A 57 yo female presents with a mass present in her left upper outer breast for 6 weeks. The most likely diagnosis is:

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Evaluation of Breast Masses

- Differential diagnosis
- History and physical exam
- Further diagnostic studies

Differential Diagnosis

- Normal, dense breast tissue
- Fibroadenoma
- Macrocyst
- Fat necrosis, hematoma
- Carcinoma

Fibroadenoma



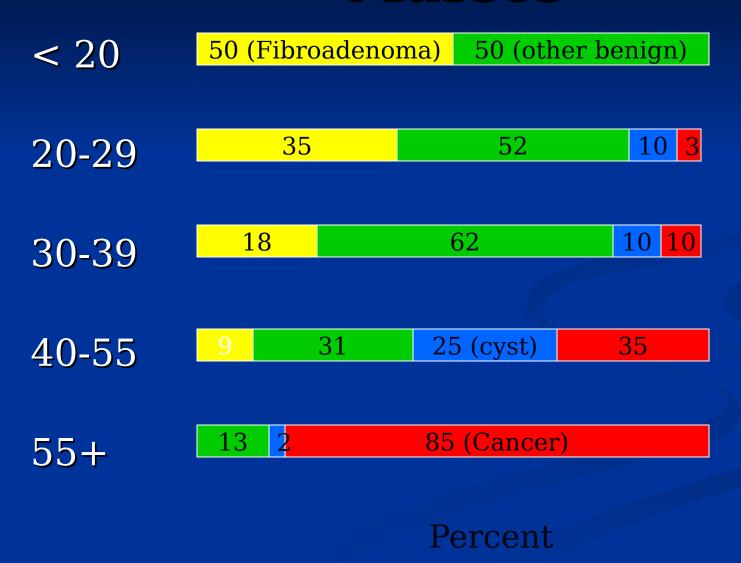
Dominant Cyst



Carcinoma



Etiology of Discrete Breast Masses



History

- Personal history of breast CA
- Personal history of breast biopsy
 - LCIS
 - ADH
- Family history
 - First order relatives
 - Relationship to menopause

History

- Estrogen exposure
 - Menarche
 - Menopause
 - GxPx status, age at first delivery
 - HRT
- Mammogram history
- ? Monthly SBE

History

- Mass
 - When first noticed
 - Trauma
 - Change in size
 - Tenderness

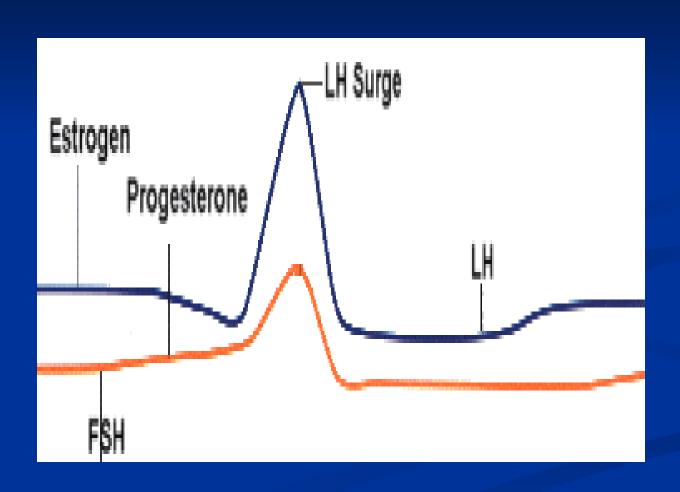
Physical Exam

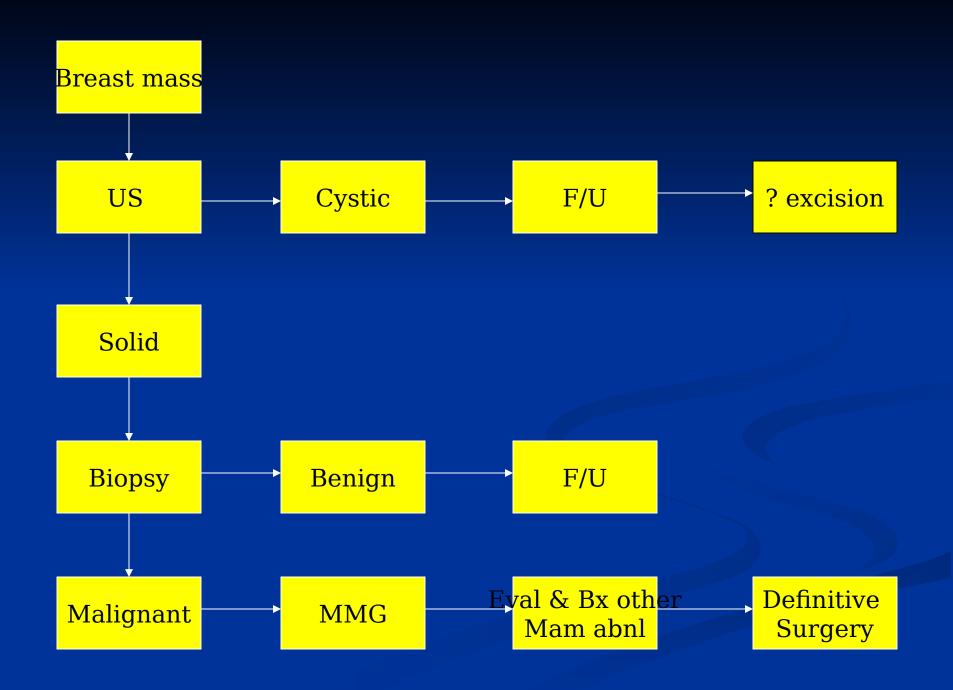
- Skin or nipple retraction
- Mass
 - Location
 - Size
 - Shape
 - Consistency
- LNs

Physical Exam

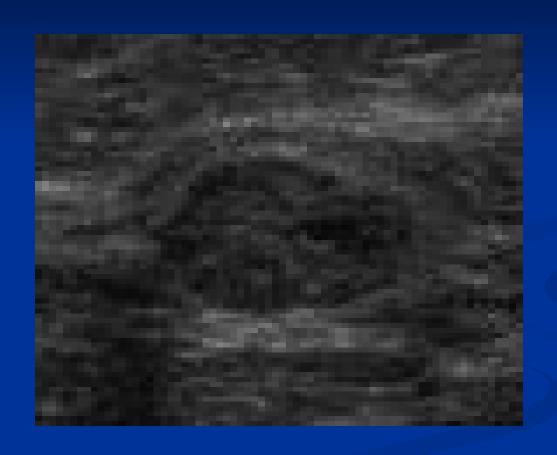
- Normal, dense breast tissue
- Location
 - Upper, outer quadrant
 - Inframammary fold
- Symmetry

Timing of CBE





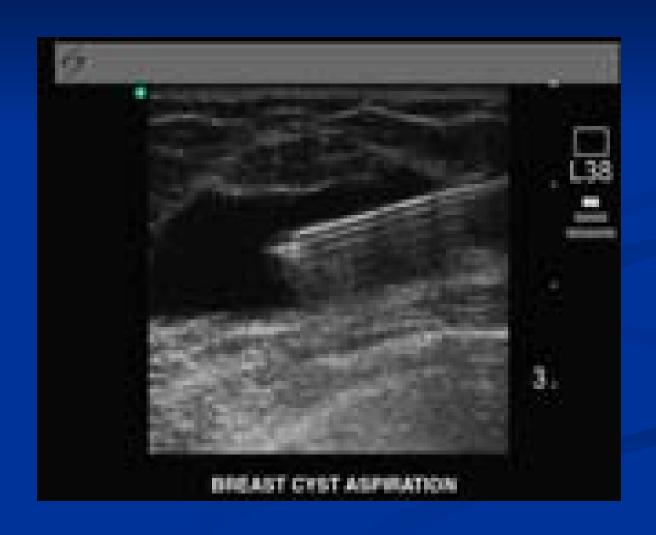
US - Fibroadenoma



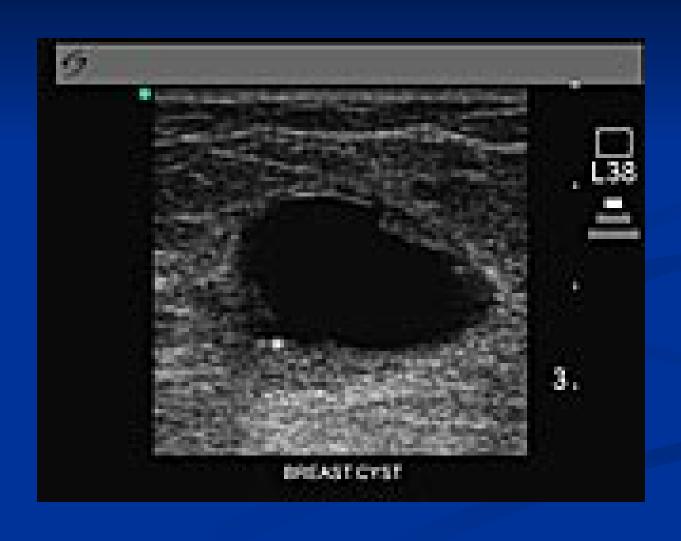
Cyst

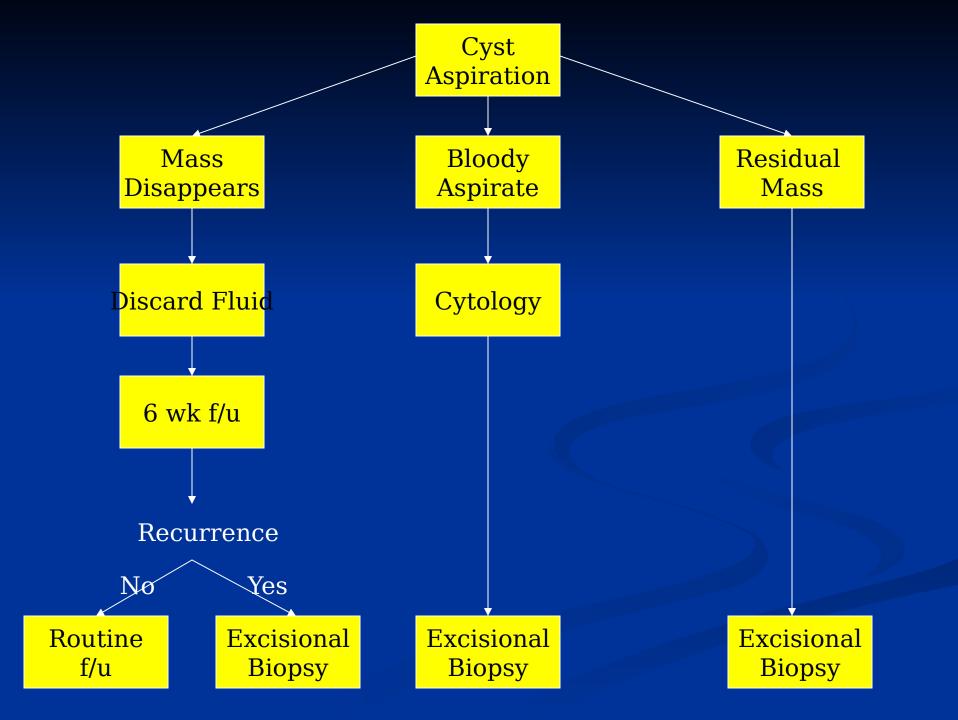


Cyst Aspiration



Cyst with Calcification

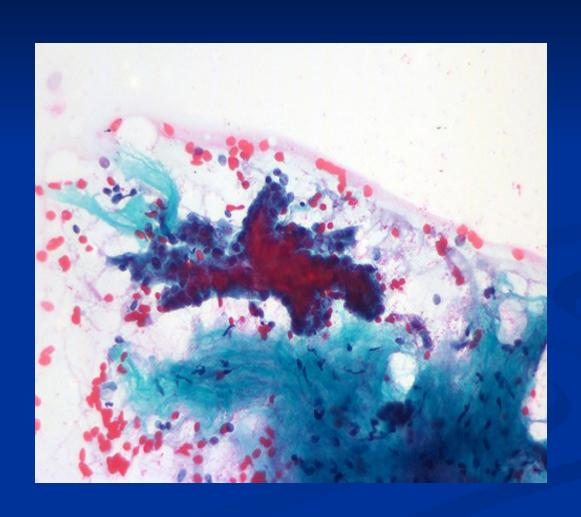




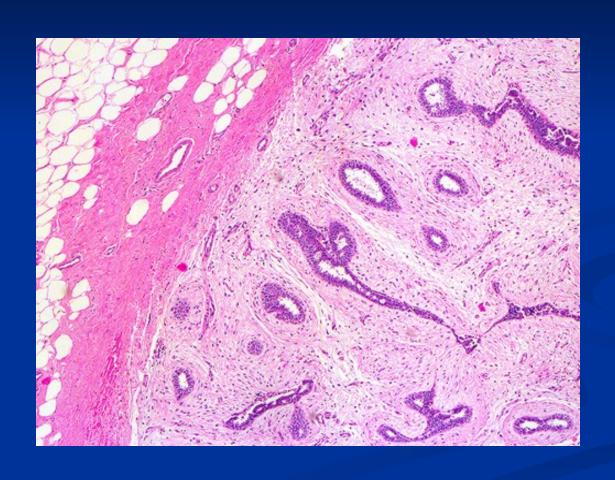
Solid Breast Masses

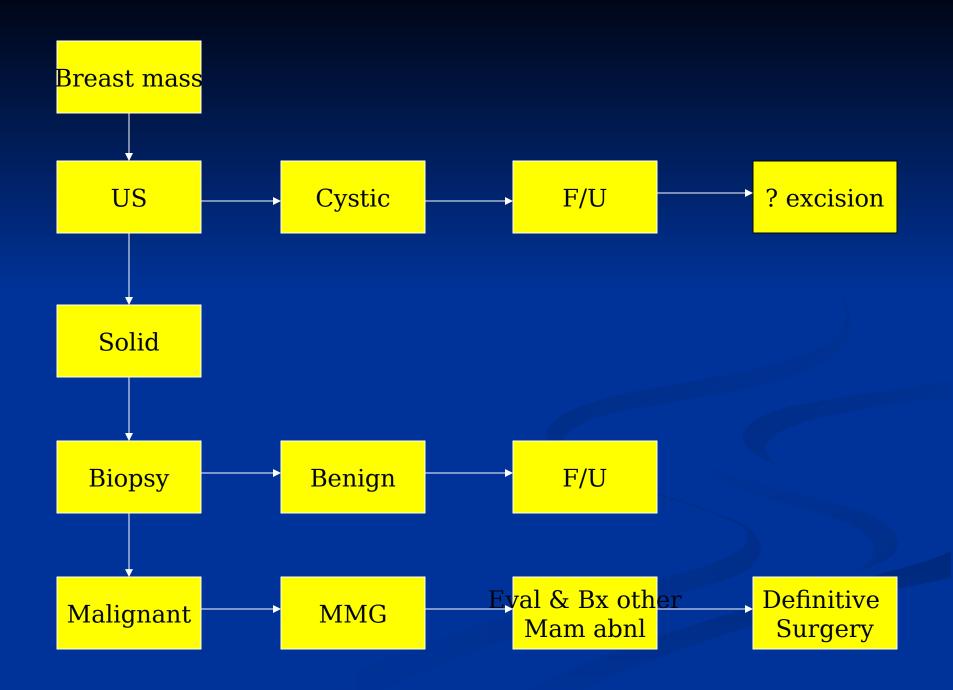
- Fine needle aspiration biopsy
 - 22-gauge needle, 10 cc syringe
 - cytology
- Core biopsy
 - Possible to delineate architecture
- Excisional biopsy
 - Gold standard

FNA



Excisional Biopsy





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Breast Bud

- Puberty:
 - FSH stimulates ovaries to produce estrogen
 - Estrogen promotes growth and development of breasts
 - Tanner phase
 - I nipple/breast project as single mound.
 - II increased amount of palpable glandular tissue

increased diameter of pigmentation of areola breast and nipple remain in single plane

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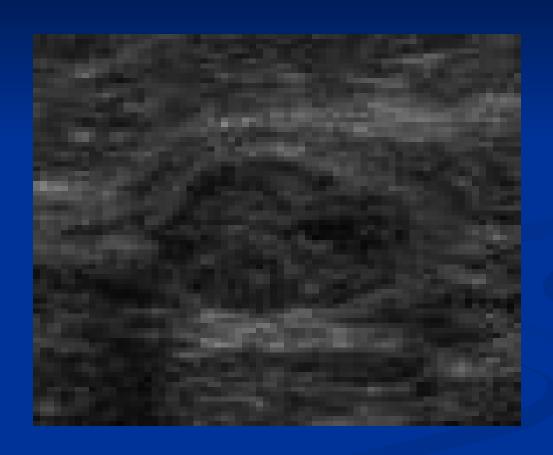
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Fibroadenoma

- Who warrants excision?
 - Lesion > 2 cm
 - Lesion increasing significantly in size during observation period
 - Patient preference

US - Fibroadenoma

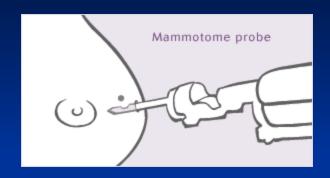


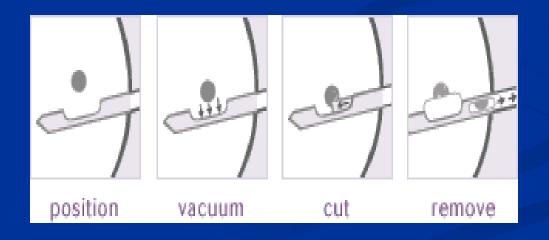
Mammotome





Mammotome





Mammotome



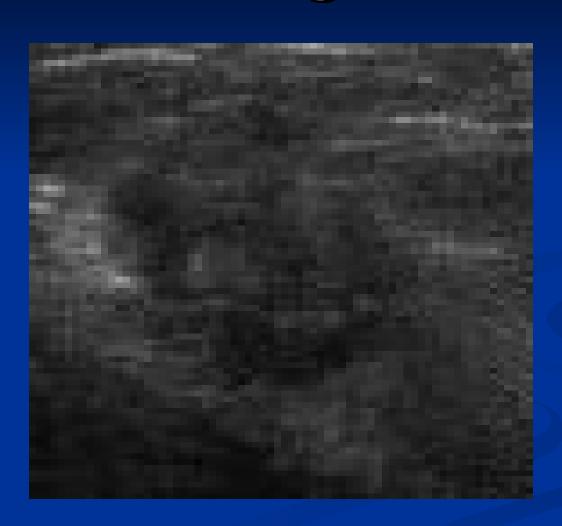
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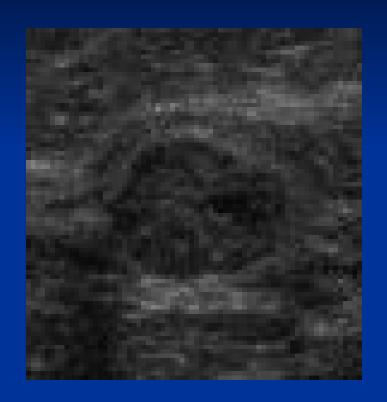
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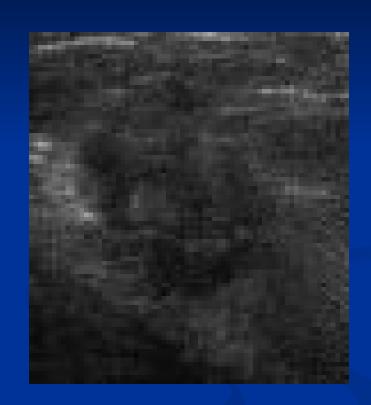
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US-Infiltrating Ductal CA

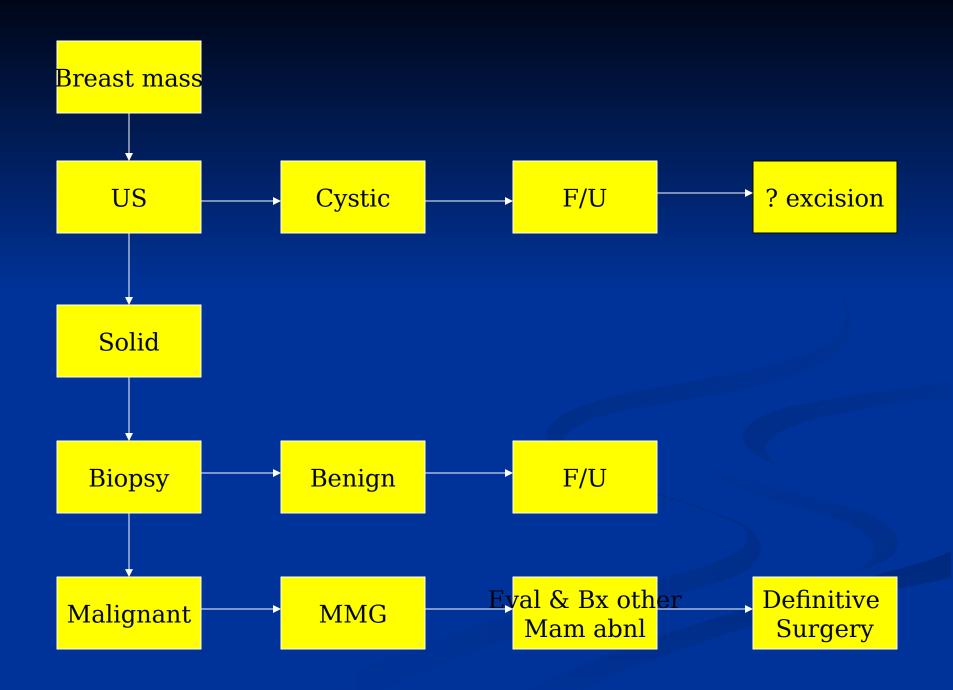




Fibroadenoma



Carcinoma



Evaluation of a Breast Mass

- When to refer to surgery
 - As soon as you identify a patient with a mass that you do not believe is normal, dense breast tissue
- What studies to order prior to sending to surgeon
 - Premenopausal US
 - Postmenopausal none
 - Do not delay referral to obtain studies!

Summary

Differential diagnosis is dictated by patient's age

BREAST MASS IN A
POSTMENOPAUSAL PATIENT IS A
CANCER UNTIL PROVEN OTHERWISE

- Cyst? Solid?
 - US
 - Aspiration

Summary

- Biopsy
 - FNA
 - Core
 - Excisional
- Surgical Referral
 - Sooner rather than later
 - Talk to your surgeon!

Questions?